BEST AVALABILITATION OF DOCKET Number

PATE	NT APP	LICATION	FFF	DETERMINATION	RECORD
TMIL.	14:			THE REPUBLISHED AND A	nevoni

Effective October 1, 2000

09, 759,662

CLAIMS AS FILED - PART I								SMALL ENTITY			OTHER THAN	
TOTAL OLIVINA			(Column 1) (Column 2)				TYPE		OR.	SMALL	ENTITY	
TOTAL CLAIMS					E SALE SEPTIME			RATE	FEE		RATE	FEE
FOR			NUMBER F			ER EXTRA		BASIC FEE	355.00	OR	BASIC FEE	710.00
TOTAL CHARGEABLE CLAIMS			2 minus 20= ' /				X\$ 9=		OR	X\$18=	į	
INDEPENDENT CLAIMS			3 mir	nus 3 =	= /			X40=		OR	X80=	
MU	LTIPLE DEPEN	DENT CLAIM PI	RESENT (ENT U			+135=		OR	+270=		
* if	the difference	in column 1 is	less than ze	ro, ente	r "0" in c	olumn 2		TOTAL		OR	TOTAL	
CLAIMS AS AMENDED - PART II (Column 1) (Column 2)						(Column 3)	-	SMALL E	ENTITY	OR	OTHER SMALL	
ENT A		CLAIMS REMAINING AFTER -AMENUMENT		HIGH NUM PREVIO	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMENT	Total	. 44	Minus	4	0	24		X \$ 9≃		ОН	X\$18=	432
AME	Independent	. 3	Minus	• • • • • • •		=		X40=		OR	X80=	
	FIRST PRESE	NTATION OF M	OLIN'LE DEI	LISTALIA	I CLAIM		1	+135≈		ΘR	+270=-	
							-	TOTAL			TOTAL	
		(Column 1)		(Colu	mn 2)	(Column 3)		ADDIT. FEE	<u> </u>	,	ADDIT, FEE	
ENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGI NUM PREVI PAIO	IBER: OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENOMENT B	Total	ń	Minus	**		=		X\$ 9=		OR	X\$18=	
	independent	•	Minus	111				X40≈		OR	X80=	
Ĺ	FIRST PRESE	NTATION OF M	ULTIPLE DEF	FNDEN	CLAIM		J	+135=		OR	+270=	
					,			TOTAL ADDIT, FEE		ОЯ	TOTAL ADDIT: FEE	
(Column 1) (Column 2) (Column 3)												
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT				PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	* *		=		X\$ 9=		OR	X\$18=	
AME	Independent		Minus	*13	· · · · · · · · · · · · · · · · · · ·	=		X40=		OR	X80=	
	FIRST PRESE	NTATION OF M	OLTIPLE DEA	LHDEN	I CLAIM		J				+270=	
 If the entry in column 1 is loss than the entry in column 2, write "0" in column 3. If the "Highest Number Previously Paid For" in THIS SPACE is less than 20, enter "20." 								+135= TOTAL		OR	TOTAL	
***	If the "Highest Nu	mber Proviousty F	aid For' IN THI	S SPACE	is loss tha	in 3, enter "3."	,	ADDIT, FEE			ADDIT. FEE	L
The "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												

FORM PTO-875 (Rev. 8/00)

Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE 1U.S. GPO: 2000-450-706/30103

Please Chy Fie